## UTILITY

| Attorney Docket No.: S-100,641                                |           |
|---|-----------|
| First Inventor or Application Identifier: Melissa A. Petruska |           |
| Title: NANOCRYSTAL/SOL-GEL NANOCOMPOSITES                     |           |
| Express Mail Label No.: ER311841367                           | PTG<br>36 |

| PATENT APPLICATION  First Inventor or Application Identifier: INICIDENT APPLICATION  Title: NANOCRYSTAL/SOL-GEL NANOCOMPOSITES                     |  |  |  |  |  |
|--|--|--|--|--|--|
| TRANSMITTAL  |  |  |  |  |  |
|  | Express Mail Label No.: ER311841367  |  |  |  |  |
| APPLICATION ELEMENTS   | Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450                        |  |  |  |  |
| 1.   * Fee Transmittal Form (e.g. PTO/SB/17) (submit an original and a duplicate for fee processing)   | 6. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)   |  |  |  |  |
| 2.   | ACCOMPANYING APPLICATION PARTS    ACCOMPANYING APPLICATION PARTS   |  |  |  |  |
| inventor(s) named in the prior application see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b   |  |  |  |  |  |
| ☐ Continuation ☐ Divisional ☐ Continuation  Prior application information: Examiner:  For CONTINUATION or DIVISIONAL APPS only: The entire disc    | iate box, and supply the requisite information below and in a preliminary amendment: ion-in-part (CIP) of prior application S.N/ |  |  |  |  |
| 16. C  | ORRESPONDENCE ADDRESS  |  |  |  |  |
| Customer Number  | OR Correspondence Address Below  |  |  |  |  |
| 35068  |  |  |  |  |  |
| Name: Bruce H. Cottrell  Address: Los Alamos National Laborato LC/IP, MS A187  City: Los Alamos State: New I Country United States Telephone: (50) | W xico Zip Code 87545  |  |  |  |  |
| Name (Print/Type): Bruce H. Cottrell   | Registration No. (Attorney/Agent): 30,620  |  |  |  |  |
| Signature: Canal Patell  | Date: November 17, 2003  |  |  |  |  |

## FEE TRANSMITTAL For FY 2004

Patent fees are subject to annual revision (submit an original and a duplicate for fee processing)

| Complete if Known     |                     |  |  |  |
|-----------------------|---------------------|--|--|--|
| Application Number:   |                     |  |  |  |
| Filing Date:          |                     |  |  |  |
| First Named Inventor: | Melissa A. Petruska |  |  |  |
| Examiner Name:        |                     |  |  |  |
| Group/Art Unit:       |                     |  |  |  |
| Attorney Docket No :  | \$ 100 641          |  |  |  |

|  |                                   | Attorney                           | 3-100,641   |                               |  |
|--|-----------------------------------|------------------------------------|---|-------------------------------|--|
| METHOD OF PAYMENT  | FEE CALCULATION (continued)       |                                    |   |                               |  |
| <ol> <li>The commissioner is hereby authorized to charge indicated fees and credit any over payments to:         Deposit Account Number: 12-2150         Deposit Account Name: Los Alamos National Laboratory         Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17     </li> </ol> | 3. ADDI<br>Large<br>Entity<br>Fee | TIONAL F<br>Small<br>Entity<br>Fee | Fee Description   | Fee Paid                      |  |
| ☐ Applicant claims small entity status.  | \$130                             | \$65                               | Surcharge – late filing fee or oath                                     | 1001 414                      |  |
| See 37 CFR 1.27  | \$50                              | \$25                               | Surcharge - late provisional filing fee or cover sh                     | eet                           |  |
| FEE CALCULATION  | \$2,520                           | \$2,520                            | For filing a request for reexamination                                  |                               |  |
| 4 84810 511 1810 555   | \$110                             | \$55                               | Extension for reply within first month                                  |                               |  |
| 1. BASIC FILING FEE  | \$420                             | \$210                              | Extension for reply within second month                                 |                               |  |
| Large Entity Small Entity  | \$950                             | \$475                              | Extension for reply within third month                                  |                               |  |
| Fee Fee Fee Description Fee Paid \$770 \$385 Utility filing fee 385  | \$1,480                           | \$740                              | Extension for reply within fourth month                                 |                               |  |
| \$770 \$385 Reissue filing fee   | \$2,010                           | \$1,00                             | 5 Extension for reply within fifth month                                |                               |  |
| \$160 \$80 Provisional filing fee  | \$330                             | \$165                              | Notice of Appeal  |                               |  |
| SUBTOTAL (1) \$385.00  | \$330                             | \$165                              | Filing a brief in support of an appeal                                  |                               |  |
|  | \$290                             | \$145                              | Request for oral hearing  |                               |  |
| ·  | \$110                             | \$55                               | Petition to revive – unavoidable  |                               |  |
|  | \$110                             | \$55                               | Terminal Disclaimer   |                               |  |
|  | \$1,330                           | \$665                              | Petition to revive – unintentional                                      |                               |  |
|  | \$130                             | \$130                              | Petitions to the Commissioner   |                               |  |
| 2. EXTRA CLAIM FEES  |                                   | \$50                               | Petitions related to provisional applications                           |                               |  |
| Extra Fee from Fee Paid  | \$ 180                            | \$180                              | Submission of Information Disclosure Statement                          |                               |  |
| Claims Below Total Claims 26 –20** = 6 X 9 = 54 Independent 4 –3 ** = 1 X 43 = 43  | \$770                             | \$385                              | Filing a submission after final rejection (37 CFR 1.129 (a))            |                               |  |
| Claims Multiple Dependent =  | \$770                             | \$385                              | For each additional invention to be examined (37 CFR 1.129(b))          |                               |  |
| ** or number previously paid, if greater; For Reissues, see below  | \$100                             | \$100                              | Certificate of Correction   |                               |  |
| Large Small  | \$300                             | \$300                              | Publication fee for early, voluntary, or normal publication             |                               |  |
| \$18 \$9 Claims in excess of 20<br>\$86 \$43 Independent claims in excess of 3   | \$770                             | \$385                              | Request for Continued Examination (RCE)                                 |                               |  |
| \$290 \$145 Multiple dependent claim, if not paid.<br>\$86 \$43 ** Reissue independent claims  |                                   | e (specify)                        |   |                               |  |
| over original patent   |                                   |                                    | SUBTOTAL (3)  | \$0                           |  |
| \$18 \$9 ** Reissue claims in excess of 20 and over original patent  |                                   | Reduced by Basic Filling Fee Paid  |   |                               |  |
| SUBTOTAL (2) \$106   |                                   | ,                                  | SUBTOTAL FROM 1 SUBTOTAL FROM 2 SUBTOTAL FROM 3 TOTAL AMOUNT OF PAYMENT | \$385<br>\$97<br>\$0<br>\$482 |  |

| SUBMITTED BY  |                   |                                       | Complete (if applicable) |           |               |
|---------------|-------------------|---------------------------------------|--------------------------|-----------|---------------|
| Printed Name: | Bruce H. Cottrell | · · · · · · · · · · · · · · · · · · · | •                        | Reg. No.  | 30,620        |
| Signature:    | Brue H            | Cothell                               | Date: 11/17/03           | Telephone | (505)667-9168 |